

Form CPF M 102: Campaign Finance Report **Municipal Form**

Office of Campaign and Political Finance TOWN CLERK'S OFFICE

HAMILTON, MA

File with: City or Town Clerk or Election Commission Ending Date: 2010 5/5/101 0 1/28/10 Fill in Reporting Period dates: Beginning Date: Type of Report: (Check one) X 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution Deffrey Thomas Stinson The Stinson Committee Candidate Full Name (if applicable) Committee Name Selectman, Hamilton, MA Eileen Stinson Office Sought and District Name of Committee Treasurer 14 Homestead Circle, Hamilton, MA 019852 14 Homestead Circle, Hamilton, MA Residential Address Committee Mailing Address 978-660-2462 978-468-0171 Telephone Number (optional): Telephone Number (optional): SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report 1985.00 Line 2: Total receipts this period (page 3, line 11) 1985.00 Line 3: Subtotal (line 1 plus line 2) 1853.56 Line 4: Total expenditures this period (page 5, line 14) 131.44 Line 5: Ending Balance (line 3 minus line 4) 497.00 Line 6: Total in-kind contributions this period (page 6) Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used: Equitable Co-operative Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: (Treasurer's signature) FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Date: Signed under the penalties of perjury: (Candidate's signature)

SCHEDULE A: RECEIPTS The Stinson Committee

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50 In Addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year. TOWN CLERK'S OFFICE

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required) Amount		Occupation & Employer 3: 36 (for contributions of \$200 or more)
3/1/10	Clayton, Barbara. 344 Eastern Ave, Lynn,MA 01902	100.00	
3/1/10	Flummerfelt, Ruth 59 Greenbrook Rd, So Hamilton,MA 01982	100.00	
2/3/10	Francis, Beverly 2 Victory Rd, Apt #40 Lynn,MA 01902	100.00	
3/1/10	Haddon, Dolores, 10 Cameron Rd, Lynn, MA 01904	100.00	
3/27/10	Hook, Mr & Mrs William 2 Middleton Drive, No Reading,MA 01864	100.00	
3/27/10	Mazzetta, Andrew 15 SavoySt, Hamilton, MA 01982	100.00	
3/1//0	Ralph, Mr & Mrs S. Lester, 88 King St, Reading,MA 01867	100.00	
3/5/10	Ralph, Thomas 38 Flint St, Lynn, MA 01905	250.00	Self-employed Thomas Ralph Co PO Box 27 Beverly, MA 01915
2/3/10	Stinson, Eileen 17 Cameron Rd. Lynn, MA 01904	100.00	
3/1/10	Stinson, Mr & Mrs William 9 Grant St, Peabody, MA 01960	100.00	
2/22/10	Strong, Shelby 17 School St, Essex MA 01929	100.00	
Line 9: Total Receipts over \$50 (or listed above)		1250.00	
Line 10: Total Receipts \$50 and under* (not listed above)		735.00	
Line 11: TOTAL RECEIPTS IN THE PERIOD 1985.00			← Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES the Stinson Committee

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and Finder has been added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	3: 3b Amount
3/6/10	Poteet, Stephanie	199 Strathmore Rd #9 Brighton, MA 02135		100.00
3/1/10	Stinson, Jeffrey	14 Homestead Circle, Hamilton, MA 01982	Signs	908.43
3/1/10	Stinson, Jeffrey	14 Homestead Circle, Hamilton, MA01982	Printing & Postage	221.72
3/26/10	Stinson, Richard	14 Homestead Circle, Hamilton, MA 01982	Kick-off party expenses	623.41
		Line 12: Total Expenditures over \$50 (or listed above)		1853.56
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	C
	Enter on page 1, line 4	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	1853.56

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS the Stinson Committee

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	The state of the s	Residential Address	Description of Contribution	: 3b _{Value}
2/5/10	Spiridigliozzi, Mr & Mrs Michael	21 Wirling Drive, Beverly,MA 01915	Postcards	90.0
2/27/10	Stinson, Mr & Mrs Richard	14 Homestead Circle, Hamilton, MA 01982	Hall rental for kick-offparty	250.0
3/15/10	Spiridigliozzi, Mr & Mrs Michael	21 Wirling Drive, Beverly,MA 01915	Postcards	90.0
	I	Line 15: In-Kind Contributions of	over \$50 (or listed above)	430.00
	I	Line 16: In-Kind Contributions \$:	50 & under (not listed above)	67.00
	Enter on page 1, line $6 \rightarrow I$	Line 17: TOTAL IN-KIND CO	NTRIBUTIONS	497.00

* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer. Page 6

SCHEDULE D: LIABILITIES +h. Stinson Committee

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose RECEIVED	
			2010 MAY IO	
	Enter on page 1, line 7 → 1	Line 18: TOTAL OUTSTAND	ING LIABILITIES (ALL)	